

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	94	14	5/30/0
O.I.P.E. CLASSIFIER		71622	10/5
FORMALITY REVIEW		71622	11-11-00
RESPONSE FORMALITY REVIEW		71622	11-28-00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	10/10/02
2	✓	✓	10/10/02
3	✓	✓	10/10/02
4	✓	✓	10/10/02
5	✓	✓	10/10/02
6	✓	✓	10/10/02
7	✓	✓	10/10/02
8	✓	✓	10/10/02
9	✓	✓	10/10/02
10	✓	✓	10/10/02
11	✓	✓	10/10/02
12	✓	✓	10/10/02
13	✓	✓	10/10/02
14	✓	✓	10/10/02
15	✓	✓	10/10/02
16	✓	✓	10/10/02
17	✓	✓	10/10/02
18	✓	✓	10/10/02
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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